SECOND SUPPLEMENTAL APPLICATION DATA SHEET

Application Information

Application number:: 10/582,705 Filing Date:: June 12, 2006 Application Type:: Regular Subject Matter:: Utility Suggested classification:: Suggested Group Art Unit:: CD-ROM or CD-R?:: Listing Number of CD disks:: 3 Number of copies of CDs:: 3 Sequence submission?:: CD Computer Readable Form (CRF)?:: Yes Number of copies of CRF:: 1 Title :: METHOD AND NUCLEIC ACIDS FOR THE IMPROVED TREATMENT OF BREAST CELL PROLIFERATIVE DISORDERS Attorney Docket Number:: 47675-198 Request for Early Publication?:: No Request for Non-Publication?:: No Suggested Drawing Figure:: Total Drawing Sheets:: 110 Small Entity?:: Yes Petition included?:: No Petition Type:: Licensed U.S. Gov't Agency:: No

Contract or Grant No::

Secrecy Order in Parent Appl.?:: No First Applicant Information Applicant Authority Type:: Inventor NL Primary Citizenship Country:: Status:: Full capacity Given Name:: John Middle Name:: Family Name:: Foekens Name Suffix:: City of Residence:: Rotterdam State or Province of Residence:: Country of Residence:: NL Street of mailing address:: Filosofentuin 35 City of mailing address:: Rotterdam State or Province of mailing address:: Country of mailing address:: NL Postal or Zip Code of mailing address:: NL-2908 XA **Second Applicant Information** Applicant Authority Type:: Inventor Primary Citizenship Country:: DE Status:: Full capacity Given Name:: Nadia Middle Name:: Family Name:: Harbeck

Name Suffix::

City of Residence:: **Otterfing** State or Province of Residence:: DE Country of Residence:: Palnkamer Str. 49 Street of mailing address:: City of mailing address:: Otterfing State or Province of mailing address:: Country of mailing address:: DE Postal or Zip Code of mailing address:: 83624 **Third Applicant Information** Applicant Authority Type:: Inventor Primary Citizenship Country:: DE Status:: Full capacity Given Name:: Thomas Middle Name:: Family Name:: Koenig Name Suffix:: City of Residence:: Berlin State or Province of Residence:: DE Country of Residence:: Street of mailing address:: Skalitzer Strasse 18 City of mailing address:: Berlin State or Province of mailing address:: Country of mailing address:: DE Postal or Zip Code of mailing address:: 10999

Fourth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Sabine
Middle Name::	
Family Name::	Maier
Name Suffix::	
City of Residence::	Brussels
State or Province of Residence::	
Country of Residence::	BE
Street of mailing address::	Rue d'Espagne 93
City of mailing address::	Brussels
State or Province of mailing address::	
Country of mailing address::	BE
Postal or Zip Code of mailing address::	1060
Fifth Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	NL
Status::	Full capacity
Given Name::	John
Middle Name::	<u>W.</u>
Family Name::	Martens
Name Suffix::	
City of Residence::	Rotterdam
State or Province of Residence::	

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address:: NL

Postal or Zip Code of mailing address:: NL-3033 BK

Sixth Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: DE

Status:: Full capacity

Given Name:: Fabian

Middle Name::

Family Name:: Model

Name Suffix::

City of Residence:: Berlin

State or Province of Residence::

Country of Residence:: DE

Street of mailing address:: Debenzerstr. 73

City of mailing address:: Berlin

State or Province of mailing address::

Country of mailing address:: DE

Seventh Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Inko
Middle Name::	
Family Name::	Nimmrich
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Heinz-Kapelle-Str. 9
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	10407
Eighth Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Manfred
Middle Name::	
Family Name::	Schmitt
Name Suffix::	
City of Residence::	Munich
State or Province of Residence::	

Country of Residence:: DE

Street of mailing address:: Hohenaschauer Str. 10

City of mailing address:: Munich

State or Province of mailing address::

Country of mailing address:: DE

Postal or Zip Code of mailing address:: 81669

Ninth Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: DE

Status:: Full capacity

Given Name:: Ralf

Middle Name::

Family Name:: Lesche

Name Suffix::

City of Residence:: Berlin

State or Province of Residence::

Country of Residence:: DE

Street of mailing address:: Platanenstrasse 89A

City of mailing address:: Berlin

State or Province of mailing address::

Country of mailing address:: DE

Tenth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Dimo
Middle Name::	
Family Name::	Dietrich
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Greifenhagenerstrasse 39
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	10437
Eleventh Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Volkmar
Middle Name::	
Family Name::	Mueller
Name Suffix::	
City of Residence::	Hamburg
State or Province of Residence::	

Country of Residence:: DE

Street of mailing address:: Dept. Genecology, University Medical

Center, Hamburg-Eppendorf, Martinistrasse

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City of mailing address:: Hamburg

State or Province of mailing address::

Country of mailing address:: DE

Postal or Zip Code of mailing address:: 20246

Twelfth Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: DE

Status:: Full capacity

Given Name::

Middle Name::

Kluth

Family Name:: <u>Lukas</u>

Name Suffix::

City of Residence:: Wentorf

State or Province of Residence::

Country of Residence:: DE

Street of mailing address:: Bergedorfer Weg 52

City of mailing address:: Wentorf

State or Province of mailing address::

Country of mailing address:: DE

Thirteenth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Ina
Middle Name::	
Family Name::	Schwope
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Islaendische Str. 16
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	10439
Fourteenth Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Oliver
Middle Name::	
Family Name::	Hartmann
Name Suffix::	
City of Residence::	Berlin
State or Province of Residence::	

Country of Residence:: DE

Street of mailing address:: Sredzkistrasse 38

City of mailing address:: Berlin

State or Province of mailing address::

Country of mailing address:: DE

Postal or Zip Code of mailing address:: 10435

Fifteenth Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full capacity

Given Name:: Peter

Middle Name::

Family Name:: Adorjan

Name Suffix::

City of Residence:: Berlin

State or Province of Residence::

Country of Residence:: DE

Street of mailing address:: Dunckerstr. 4

City of mailing address:: Berlin

State or Province of mailing address::

Country of mailing address:: DE

Sixteenth Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	DE
Status::	Full capacity
Given Name::	Almuth
Middle Name::	
Family Name::	Marx
Name Suffix::	
City of Residence::	Nuernberg
State or Province of Residence::	
Country of Residence::	DE
Street of mailing address::	Viatisstrasse 88
City of mailing address::	Nuernberg
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	90480
Seventeenth Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	AT
Status::	Full capacity
Given Name::	Heinz
Middle Name::	
Family Name::	Hoefler
Family Name:: Name Suffix::	Hoefler
	Hoefler Munich

Country of Residence::	DE
Street of mailing address::	Ismaningerstrasse 64
City of mailing address::	Munich
State or Province of mailing address::	
Country of mailing address::	DE
Postal or Zip Code of mailing address::	81675
Correspondence Information	
Correspondence Customer Number::	22504
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Phone number::	
Fax Number:	
E-Mail address::	
Representative Information	
Representative Customer Number::	22504
Domestic Priority Information	

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National stage of	PCT/EP04/014170	12/13/04

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
EP	3090432.0	12/11/03	Yes
EP	4090041.7	02/10/04	Yes
EP	4090127.4	04/01/04	Yes
EP	4013328.2	06/05/04	Yes
EP	4090380.9	09/30/04	Yes
EP	4027213.0	11/16/04	Yes

Assignee Information

Assignee name::	Epigenomics AG
Street of mailing address::	Kleine Praesidentenstrasse 1
City of mailing address::	<u>Berlin</u>
State or Province of mailing address::	
Country of mailing address::	<u>DE</u>
Postal or Zip Code of mailing address::	10178